

deforming a portion of the stent with a force in excess of the elastic limit of the portion of the stent, to implant the stent within the body passageway.

34. A method for expanding the lumen of a body passageway comprising the steps of:

(a) inserting an endovascular stent disposed upon a catheter into the body passageway until it is disposed adjacent a desired location within the body passageway; and

(b) expanding a portion of the catheter to provide controllable expansion of the endovascular stent outwardly into contact with the body passageway, by deforming a portion of the endovascular stent with a force in excess of the elastic limit of the portion of the stent, until the lumen of the body passageway at the desired location in the body passageway has been expanded, whereby the endovascular stent prevents the body passageway from collapsing, and the endovascular stent remains in the passageway.

#### REMARKS

The present Preliminary Amendment is submitted concurrently with a Continuation Application to the parent application, Serial Number 25,736, to the same inventor. Applicant has cancelled claims 1-27 and amended original claim 28 to remove the structural definition limitations to the stent and to include the step of inelastically expanding the stent while maintaining the longitudinal length of the stent.

Applicant has added claim 29 defining an apparatus for intraluminally reinforcing a body passageway, and claim 30 defining a method for expanding the lumen of a passageway. Each of the claims 28-30 includes the limitation that expansion of the stent to an expanded diameter occur without any change of length of the stent. Although not discussed in these express terms, this limitation is implicit in the description of the function of the preferred embodiment in which the clockwise and counter-clockwise loops diverge circumferentially without any mention of the axial shortening that arises in the stents and implants of the prior art. By comparing the contracted and expanded conditions of the stent illustrated in FIGS. 3 and 4 of the continuation application, it can be seen that no change in longitudinal length of the stent has been represented in the figures. Support is also found at page 9, lines 14-17 in which the stent is described as having sufficient strength and stiffness to avoid the loops being forced into an overlying relation, that is, axial shortening.

Applicant has also proposed new claims 31-34 in order to provoke an interference with the patent issued to Palmaz, U.S. No. 4,733,665. These claims are believed to define interfering subject matter. Applicant will make its prima facie showing of entitlement to a judgment of priority, including supporting declarations and documentation, by separate paper following this Preliminary Amendment. Proposed counts for the Interference will also be presented in the separate paper.

However, it can be pointed out that Applicant's proposed claim 31 corresponds to claims 13 and 18 of the Palmaz patent, except that the proposed claim more broadly defines the claimed implant. The limitations in Palmaz requiring that the implant include a plurality of intersecting elongate members and that the implant be subject to a radial force have been removed. Claim 32 generally corresponds to Palmaz claims 23 and 26, but is broader than the Palmaz claims for the reasons stated above. Applicant's proposed method claims 33 and 34 correspond to Palmaz claims 1 and 7. Applicant's claims are broader in that the radial limitation to the expanding force in Palmaz has been removed.

Apart from the claims proposed for purposes of provoking an interference, it is believed that claims 28-30 define patentable subject matter and favorable consideration of these claims is requested.

Respectfully submitted,

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